

AGENCY NAME: _____

CITY: _____ **ZIP:** _____

PROJECT NAME: _____

PROBLEM STATEMENT:(background, problem identification, community and/or agency needs, resources available)

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OBJECTIVES: (Specific, measurable changes you expect to accomplish. Objectives promise a solution or reduction of the problem.)

The first two are required as written. The others are to be developed and written for your community/agency needs.

1. Submit activity and expenditure reports each month, unless authorized by the UHSO.

2. Submit final report by November 15th

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

(Attach additional sheets if necessary)

METHODS: (These are “activities” you plan to do which will help accomplish the objectives.)

Activity #1: _____

Activity #2: _____

Activity #3: _____

Activity #4: _____

Activity #5: _____

Activity #6:

Activity #7:

Activity #8:

Activity #9:

Activity #10:

(Attach additional pages if necessary)

TIME LINE: (Date when objectives will be accomplished.)

EVALUATION: (How you plan to measure program accomplishments.)

BUDGET:

A. Proposed Budget for Highway Safety Funds

1. Personnel (salary/benefits) \$ _____
Hourly rate/total hours: _____
2. Supplies and Operating (materials,
incentives, and other expenses) \$ _____

Items, quantity, unit cost: _____

3. Travel (lodging, per diem, mileage) \$ _____
Explain: _____

4. Contractual Services (with other agencies) \$ _____
List agencies: _____

5. Equipment \$ _____
Items, quantity, unit cost: _____

TOTAL PROPOSED HIGHWAY SAFETY BUDGET..... \$ _____

B. Estimated Agency (In-Kind) Contributions
(must be at least 25 percent of Highway Safety Funds)

1. Personnel \$ _____
2. Supplies and Operating \$ _____
3. Travel \$ _____
4. Equipment \$ _____

TOTAL AGENCY CONTRIBUTIONS \$ _____